Fill	in this information to identify your c	ase:							
	otor 1 Daniel O. Da								
	otor 2 ouse, if filing)	•							
Uni	ted States Bankruptcy Court for the	e: MIDDLE DISTRICT O	F PENNSYLVAN I A						
	se number nown)	Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:							
0	fficial Form 106I		MM / DD/ YYYY						
	chedule I: Your Inc	12/15							
sup spo atta	as complete and accurate as pose plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The Describe Employment	are married and not fili or spouse is not filing w	ng jointly, and your s ith you, do not includ	spouse is de informa	living with you, ation about your	include inform spouse. If mo	nation about your ore space is neede	ed,	
	information.		Debtor 1		Debt	or 2 or non-fil	ing spouse		
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employed			☐ Employed ☐ Not employed			
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the da ss you are separated.	ate you file this form. If y	ou have nothing to rep	ort for any	line, write \$0 in th	e space. Includ	le your non-filing sp	oouse	
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all em	ployers for that p	erson on the lir	nes below. If you no	eed	
					For Debtor 1	For Deb	tor 2 or ng spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,		2.	\$0.	00 \$	N/A_			
3.	Estimate and list monthly overtime pay.			3. +	-\$0.	00 +\$	N/A		
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	_ \$	N/A_		

				For Debtor 1		For Debtor 2 or non-filing spouse			
	Сору	r line 4 here	4.	\$	0.00	\$	N/A		
E	l int n	all manufall deductions.			_				
5.		all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	0.00	\$	N/A		
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A		
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A		
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A		
	5e.	Insurance	5e.	\$_	0.00	\$	N/A		
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A		
	5g.	Union dues	5g.	\$_	0.00	\$	<u>N/A</u>		
	5h.	Other deductions. Specify:	_ 5h.+	\$_	0.00 +	\$	N/A		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A		
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	<u>N/A</u>		
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	\$	N/A_		
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	N/A_		
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A		
	8e.	Social Security	8e.	\$	1,540.00	\$	N/A		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$_	0.00	\$	N/A		
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A		
		Fiance's Contribution to Plan	0.1	•	4.075.00	•	N1/A		
	8h.	Other monthly income. Specify: Payment	_ ^{8h.+}	<u></u> \$_	1,075.00 +		N/A		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,615.00	\$_	N/A		
10.		ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,615.00 + \$		N/A = \$ 2,615.00		
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:								
12.	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{2,615.0}{2}\$								
4.6	_		_				Combined monthly income		
13.	Do yo	ou expect an increase or decrease within the year after you file this form No. Yes Explain:	7						

Official Form 106I
Case 5:23-bk-00029-MJC